

**CITY OF NORTH MIAMI
APPLICATION FOR CONDITIONAL
CERTIFICATE OF REOCCUPANCY**

Date of Application: _____ Folio Number: _____

Address of Property: _____

Person to Contact: _____

Telephone number of Contact: _____

Buyers Name as it is to appear on the Conditional Certificate: _____

Buyers E-mail: _____

Buyers Mailing Address: _____

APPLICATION FEE : \$ 500.00

PAID CHECK # _____

OFFICIAL USE ONLY

DOCUMENTS ATTACHED FOR CITY MANAGERS REVIEW

_____ CERTIFICATE OF REOCCUPANCY DENIAL

_____ MICROFILM REOCRDS

_____ DADE COUNTY PROPERTY RECORD

_____ VARIANCE/COVENANT

_____ COMPUTER PERMIT RECORDS

_____ UTILITY BILLING RECORD

_____ REALTY CARDS

_____ OCCUPATIONAL LICENSE

Manager & City Attorney

_____ Approved by City Manager _____ Date: _____

Signature

_____ Denied by City Manager

_____ Sent to City Attorney's Office Date: _____

_____ Certificate prepared and sent to Building & Zoning Date: _____